



Notification of Residential Asbestos Abatement Project

(Home Owner Form)

ASBESTOS SECTION - 2600 BULL STREET - COLUMBIA - SC - 29201

PHONE (803) 898-4289 - FAX (803) 898-4281

Office Use Only: Project License No.:

Date Issued:

I. NAME OF HOME OWNER: _____

MAILING ADDRESS: _____ PHONE: (____) _____

CITY: _____ STATE: _____ ZIP: _____

II. SITE ADDRESS (*physical location preferred*): _____

CITY: _____ STATE: _____ ZIP: _____

III. PROCEDURE(S) USED TO REMOVE ASBESTOS MATERIAL: _____

IV. ASBESTOS-CONTAINING MATERIALS (ACM) TO BE REMOVED:

TYPE (SIDING, FLOORING, ROOFING, OTHER)	AMOUNT (SQUARE FEET, LINEAR FEET, LBS., BAGS, OTHER)	CONDITION (i.e. crumbled, pulverized, powder, large sections)

V. SCHEDULED DATES OF REMOVAL: Start Date: _____ Completion Date: _____

VI. WASTE DISPOSAL SITE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CONTACT PERSON: _____ PHONE: (____) _____

VII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

(SIGNATURE OF OWNER/OPERATOR)

(DATE)

For additional information concerning regulatory requirements call or visit our web site at http://www.scdhec.net/eqc/baq/html/asb_home.html

Disclaimer: Although the removal of asbestos containing material in private residences is not generally regulated, the Department does not recommend that any untrained person engage in such activity. Contractors specializing in asbestos abatement can be found in your local yellow pages. A list of licensed asbestos abatement contractors is also available through the Department free of charge.